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## BIB DATA SHEET

CONFIRMATION NO. 7028

<b>SERIAL NUMBER</b> 10/815,179	<b>FILING or 371(c) DATE</b> 03/31/2004 <b>RULE</b>	<b>CLASS</b> 162	<b>GROUP ART UNIT</b> 1731	<b>ATTORNEY DOCKET NO.</b> VALMET-101		
<b>APPLICANTS</b> John David Breiten, Rockton, IL; Markku Lemetyinen, Clifton Park, NY; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/10/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>Examiner's Signature</u> <u>MK</u>		<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 8
<b>ADDRESS</b> STIENNON & STIENNON 612 W. MAIN ST., SUITE 201 P.O. BOX 1667 MADISON, WI 53701-1667 UNITED STATES						
<b>TITLE</b> Universal doctor blade with indicia						
<b>FILING FEE RECEIVED</b> 1380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		